15. The method of claim **8**, further comprising predicting anti-androgen treatment response via evaluation of genetic variation in the gene and/or promotor region of the androgen receptor (AR).

16. The method of claim **15**, further comprising guiding selection of anti-androgen treatment and/or dosage selection of the selected anti-androgen treatment based on the predicted anti-androgen treatment response.

17. The method of claim **15**, wherein predicting the anti-androgen treatment response involves measuring polymorphisms in the AR gene.

18. The method of claim **15**, wherein:

the number of cytosine-adenine-guanine (CAG) repeats in the first exon of the AR gene, the number of guanine-guanine-(any nucleotide) (GGN) repeats in the first exon in the AR gene, and/or a ratio of CAG/GGN repeats is used as the genetic variant; and

a cut off value for the number of CAG repeats the first exon of AR gene is used to define a person with androgen sensitivity.

19. The method of claim **18**, wherein the cut-off value for the number of CAG repeats the first exon of AR gene is between 10 and 30.

20. The method of claim **15**, wherein variants in the promoter region of the AR are used as the genetic variant.

21. The method of claim **8**, wherein the anti-androgen is combined with any one or combination of an anti-inflammatory agent, an anti-bacterial agent, or aspartame.

22. The method of claim **21**, wherein the viral respiratory infection is SARS-CoV-2.

23. The method of claim **8**, wherein administering the composition involves administering:

topical skin application of finasteride at 1-30% (w/w), oral finasteride at 0.01-30 mg, dutasteride at 0.1 mg/day to 3.0 mg/day, degarelix at 24 mg-720 mg, oral flutamide at 75-2,250 mg/day, enzalutamide at 16-480 mg qd, oral dutasteride at 0.025-0.75 mg/day, apalutamide at 6-180 mg 4 times per day, injection of 30-900 mg of cyproterone acetate, subcutaneous injection of 12-360 mg of degarelix, bicalutamide at 5-150 mg per day, subcutaneous injection of 12-360 mg of degarelix, oral darolutamide at 30-900 mg twice daily, abiraterone at 50-1500 mg twice daily, oral nilutamide at 30-900 mg once daily, or docetaxel at 7.5-225 mg/m^2 IV over 1 hour.

24. The method of claim **8**, wherein administering the composition involves administering:

topical skin application of finasteride at 1-10% (w/w), oral finasteride at 0.1-10 mg, dutasteride at 0.1 mg/day to 1.0 mg/day, degarelix at 24 mg-240 mg, oral flutamide at 75-750 mg/day, enzalutamide at 16-160 mg qd, oral dutasteride at 0.025-0.25 mg/day, apalutamide at 6-60 mg 4 times per day, injection of 30-300 mg of cyproterone acetate, subcutaneous injection of 12-120 mg of degarelix, bicalutamide at 5-50 mg per day, subcutaneous injection of 12-120 mg of degarelix, oral darolutamide at 30-300 mg twice daily, abiraterone at 50-500 mg twice daily, oral nilutamide at 30-300 mg once daily, or docetaxel at 7.5-750 mg/m^2 IV over 1 hour.

25. A method of treating a patient having or suspected of having a viral respiratory infection, the method comprising:

determining the risk of severity or mortality of the viral respiratory infection for the patient by identifying and measuring genetic variation in the gene and/or promotor region of any one or combination of the androgen receptor (AR), TMPRSS2, furin, or ACE2; and

selecting a composition and a dosage for the composition based on the determined risk of severity or mortality;

administering the composition to the patient, the composition including any one or combination of:

an androgen receptor antagonists or anti-androgen;

an androgen synthesis inhibitor;

an agent that counters the effect of androgens;

a globulin (SHBG) stimulator;

an antigonadotropin;

a mineralocorticoid to suppress androgen production in the adrenal gland;

a glucocorticoid to suppress androgen production in the adrenal gland;

an insulin sensitizing medication; and

vaccine or an immunogen against androstenedione that reduces the level of testosterone or increases estrogen.

26. The method of claim **25**, wherein the method involves use of a kit, wherein:

a genetic sample via buccal swab, saliva sample, blood sample, tissue sample, and/or hair sample is obtained via a deoxyribonucleic acid (DNA) sample collection unit;

polymorphisms in the androgen receptor gene are identified via a viral respiratory infection sensitivity unit; and

an assay analysis is performed using a DNA diagnostic assay.

27. The method of claim **25**, further comprising:

predicting anti-androgen treatment response via evaluation of a genetic variation in the gene and/or promotor region in any one or combination of AR, TMPRSS2, furin, or ACE2.

28. The method of claim **27**, wherein the genetic variation includes any one or combination of:

one or more of: F877L/T878A, F877L, T878A, rs137852591, rs104894742, rs1057518177, rs1057521121, rs1057521122, rs1057523747, rs1064793480, rs1064793645, rs1064794065, rs1064794069, rs1064795250, rs1085307685, rs1085307962, rs12014709, rs1204038, rs1337080, rs137852562, rs137852563, rs137852564, rs137852565, rs137852566, rs137852567, rs137852568, rs137852569, rs137852570, rs137852571, rs137852572, rs137852573, rs137852574, rs137852575, rs137852576, rs137852577, rs137852578, rs137852579, rs137852580, rs137852581, rs137852582, rs137852583, rs137852584, rs137852585, rs137852586, rs137852587, rs137852588, rs137852589, rs137852590, rs137852592, rs137852593, rs137852594, rs137852595, rs137852596, rs137852597, rs137852598, rs137852599, rs137852600, rs137852601, rs1800053, rs201934623, rs2361634, rs5031002, rs5918757, rs6152, rs6624304, rs750324117, rs754201976, rs755226547, rs759327087, rs864622007, rs869320731, rs869320732, rs878853033, rs886039558, rs886041050, rs886041128, rs886041129, rs886041130, rs886041131, rs886041132, rs886041133, rs886041352, rs9332969, or rs9332971;